CLAIM FOR UNPAID COMPENSATION OF DECEASED CIVILIAN EMPLOYEE

GENERAL INFORMATION: Any assistance deemed necessary for the proper execution of this form will be furnished to all

		PART A	
. NAME AND SOCIAL SECURITY NUMBER OF DECEASED	2. D	ATE OF DEATH	3. EMPLOYING AGENCY
			4. LAST ADDRESS OF DECEASED
			4. LAST ADDRESS OF DECEASED
PRIVACY ACT NOTICE TO CLAIMANT(S): 1) Disclosure of your social is in the interest of economy and orderly administration that the Federecurity number will be used for identification purposes in connection with	ral Govern	nment use exclusively the social	
5. NAME(S) AND SOCIAL SECURITY NUMBER(S) OF CLAIMANT(S)	6. R	ELATIONSHIP TO DECEASED	7. IF MINOR, STATE AGE
			8. IS DESIGNATION OF BENEFICIARY FOR UNPAID COMPENSATION ON FILE WITH AGENCY?
			YES NO
			9. ARE YOU NAMED BENEFICIARY? YES NO
	<u> </u>	PART B	
(To be completed by the widow or widower of the deceased on Do you certify that you were married to the deceased and his/her death?	. ,	est of your knowledge and	belief that the marriage was not dissolved prior to
		PART C	
after their names which class) or the descendants of (b) If no widow or widower, child or descendant of defoster, or adoptive parent. (c) If none of the above survives, list the next of kin who	ceased o	children survives, list each	
PRIVACY ACT NOTICE: 1) Disclosure of the social security number of change. As a claimant, you should not disclose the social security numused only for purposes of identification. 2) The social security number of economy and orderly administration that the Federal Government use will be used to identify them in connection with their rights under this form	ber of the of the next e exclusive	next of kin without their prior con- kin is solicited pursuant to Execu	sent and knowledge that the disclosure is voluntary and will b tive Order 9397 of 1943 which provides that it is in the intere
Name and assist assertion	Age	Relationship	
Name and social security number	J .	to deceased	Address
Name and social security number		to deceased	Address
Name and social security number		to deceased	Address
Name and social security number		to deceased	Address
Name and social security number		to deceased	Address
Name and social security number		to deceased	Address
Name and social security number		to deceased	Address